# MULTIPLE DEPENDENT CLAIM
## FEE CALCULATION SHEET
### (FOR USE WITH FORM PTO-875)

**SERIAL NO.** 10/589136

**FILING DATE**

**APPLICANT(S)**

## CLAIMS

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | | | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. | | | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 1 | | | / | | | | | 51 | | | | | | |
| 2 | | | | / | | | | 52 | | | | | | |
| 3 | | | | / | | | | 53 | | | | | | |
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| 9 | | | | / | | | | 59 | | | | | | |
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| 11 | | | | / | | | | 61 | | | | | | |
| 12 | | | / | | | | | 62 | | | | | | |
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| 38 | | | | | | | | 88 | | | | | | |
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| 41 | | | | | | | | 91 | | | | | | |
| 42 | | | | | | | | 92 | | | | | | |
| 43 | | | | | | | | 93 | | | | | | |
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| 47 | | | | | | | | 97 | | | | | | |
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| 50 | | | | | | | | 100 | | | | | | |
| TOTAL IND. | | ↓ | 3 | ↓ | | ↓ | | TOTAL IND. | | ↓ | | ↓ | | ↓ |
| TOTAL DEP. | | ← | 15 | ← | | ← | | TOTAL DEP. | | ← | | ← | | ← |
| TOTAL CLAIMS | | | 18 | | | | | TOTAL CLAIMS | | | | | | |

PTO - 1360 (REV. 11/04)

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